TRANSPORT TO THE PROPERTY OF T

Docket No.: HO-P02191US0

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Dated: February 22, 2005 Signature:

Per Andersson et al.

Application No.: 09/674,457

Group Art Unit: 1743

Filed: May 7, 1999

Examiner: D. K. Handy

For: MICROFLUIDIC DEVICE

REQUEST FOR EXTENSION OF TIME

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Applicant hereby petitions for a two month extension of time to and including February 24, 2005 to respond to the Office Action mailed September 24, 2004. Please charge our Deposit Account No. 06-2375 in the amount of \$450.00 covering the fee set forth in 37 CFR 1.17(a)(2).

In the event that a further petition for an extension of time is required to be submitted at this time, applicant hereby petitions under 37 CFR 1.136(a) for an extension of time for as many months as are required to ensure that the above-identified application does not become abandoned.

02/28/2005 AWONDAF1 00000089 062375 09674457

01 FC:1252

450.00 DA

Application No.: 09/674,457 Docket No.: HO-P02191US0

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 06-2375, under Order No. 10104295.

Dated: February 22, 2005

Respectfully submitted,

Melissa W. Acosta

Registration No.: 45,872

FULBRIGHT & JAWORSKI L.L.P.

1301 McKinney, Suite 5100 Houston, Texas 77010-3095

(713) 651-5151

(713) 651-5246 (Fax)

Agent for Applicant

Check	Complete if Known Special Complete Fee Comple	de A		5 no person are required to	U.S. Pat	ent and Trade	mark Office: U.S. DEF	17/31/2006. OMB 0651-0032 PARTMENT OF COMMERCE a valid OMB control number.		
FEE TRANSMITTAL FOR Y 2005 Applicant claims small entity status. See 37 CFR 1.27 Applicant AMOUNT OF PAYMENT (\$) 450.00 Attomey Docket No. METHOD OF PAYMENT (\$) 450.00 METHOD OF PAYMENT (\$) 450.00 METHOD OF PAYMENT (Check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 05-2375 Diagosit Account Name: Fulbright & Jaworski L.L.P. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Cardes and that apply) The charge fee(s) indicated below Cardes and that apply) Deposit Account See(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION I. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (S) Fe	FEE TRANSMITTAL FOR Y 2005 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 At thit 1743 At thit 17	der the Paperwo			respond to a compe	Col	mplete if Know	n		
FEE TRANSMITTAL For FY 2005 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1743 Art Uni	FEE TRANSMITTAL For FY 2005 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1743 Art Unit 1743 METHOD OF PAYMENT (\$ 450.00) Attorney Docket No. HO-P02191USO METHOD OF PAYMENT (beck all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Number: 06-2375 Deposit Account Number: 07-2011 Number: 07-2	See aureuant to the C	Effective on 12/08/200	4. ons Act. 2005 (H.R. 4818).	Application N	umber	09/674,457-Cc	onf. #8539		
FIGURE FY 2005 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1743 Art Unit 1744 Art Unit 1	First Named Inventor Fet Andersson Examiner Name D. K. Handy						May 7, 1999			
Applicant claims small entity status. See 37 CFR 1.27	Applicant claims small entity status. See 37 CFR 1.27					nventor	Per Anderssor	1		
Attorney Docket No. HO-P02191USO	Application Type Fee (\$) Fee (•	For FY 200	<u>5</u>			D. K. Handy			
Attomate	METHOD OF PAYMENT (check all that apply)	A l'agent elei	me small antity status	See 37 CFR 1 27	Art I Init		1743			
Check	METHOD OF PAYMENT (check all that apply) Check					-4 No		30		
Check	Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 06-2375 Deposit Account Name: Fullbright & Jaworski L.L.P.				Attomey Dock	et No.	110 1 02 10 10			
Deposit Account Deposit Account Number Q6-2375 Deposit Account Name: Fulbright & Jaworski L.L.P.	Deposit Account Deposit Account Number: Deposit Accoun	METHOD OF PA		[]						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below	Check	Credit Card	Money Order No	one Othe	er (please ide				
Charge fee(s) indicated below	Charge fee(s) indicated below									
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	For the abo	ve-identified deposit	account, the Director	is hereby author	rized to: (ch	eck all that apply)	i s die siliere fan		
Recissue 300 150 500 250 200 100	Tee(s) under 37 CFR 1.16 and 1.17	x Charg	ge fee(s) indicated b	elow	Cha	ırge fee(s) i	ndicated below, e	xcept for the filing fee		
Residence Fee Samal Entity Samal Entity Samal Entity Fee Samal Entity Samal Entity Fee Samal Entity Samal Entity	Residence Resi	X Charg	ge any additional fee	(s) or underpayment of and 1.17	f x Cre	dit any over	payments			
Application Type	Filling FEES Small Entity Fee (\$) Fee	FEE CALCULA	TION							
Small Entity Fee (\$) Fee (\$)	Small Entity Fee (\$) Fee (\$)	I. BASIC FILING,								
Application Type	Application Type		FILI	101220						
Design 200 100 100 50 130 65	Design 200 100 100 50 130 65	Application Type	<u>Fee (\$)</u>			Fee (\$		Fees Paid (\$)		
Plant	Plant	Utility	300	150 500	250	200	100			
Plant	Plant	Design	200	100 100) 50	130	65			
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	· ·	200	100 300) 150	160	80			
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		300	150 500	250	600	300			
Excress CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$)	Excress CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Fee (\$) Fee Paid (\$) Indep. Claims Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Indep. Claims Fee (\$) Fee Paid (\$) Indep. Claims Indep. Claims Fee (\$) Fee Paid (\$) Indep. Claims Indep. Claims Fee (\$) Fee Paid (\$) Indep. Claims Indep. Cla	Provisional	200	100	0	0	0			
Each claim over 20 (including Reissues) Each claim over 3 (including Reissues) Each independent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)	Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)		I FEES							
Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Sheets or fraction and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month Registration No. (Altomey/Agent)	Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)	Fee Description								
Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Superior of each additional 50 or fraction thereof fee Paid (\$) Total Sheets Fee Paid (\$) Fee Paid (\$) Total Sheets Fee Tata Sheets Number of each additional 50 or fraction thereof fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month Registration No. (Attomey/Agent)	Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) SAPPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Fee Paid (\$) Total Sheets Fee Paid (\$) Registration No. (Attorney/Agent)	Each claim over 20	0 (including Reissue	es)						
Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$)	Total Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$)	Each independent	claim over 3 (includ	ling Reissues)						
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Sample Signature Fee (\$) Fee Paid (\$)	Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Sample of the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) (round up to a whole number) x Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00 Registration No. (Attomey/Agent) 45,872 Telephone (713) 651-540	Multiple depender	nt claims		_			500		
Indep. Claims Extra Claims X Fee (\$) Fee Paid (\$) 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) 4. OTHER FEE(\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month Registration No. (Attomey/Agent)	Indep. Claims Extra Claims X Fee (\$) Fee Paid (\$) 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof (round up to a whole number) x Fee Paid (\$ 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month Registration No. (Attomey/Agent) Registration No. (Attomey/Agent) Registration No. (Attomey/Agent) Registration No. (Attomey/Agent) Telephone (713) 651-540	Total Claims	Extra Claims	Fee (\$) Fee	Paid (\$)					
APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets	ASUBMITTED BY Signature 3. APPLICATION SIZE FEE x = x =	<u> </u>	= x	=			<u>Fee (\$)</u>	ree Paid (\$)		
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets	3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof (round up to a whole number) x Fee Paid (\$ Fee Paid (Indep. Claims		Fee (\$) Fee	Paid (\$)					
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 45,872 Telephone (713) 651-5407	4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 45,872 Telephone (713) 651-540	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 45,872 Telephone (713) 651-5407	Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 45,872 Telephone (713) 651-540				(round up to a	whole numb				
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 45,872 Telephone (713) 651-5407	Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 45,872 Telephone (713) 651-540	Non-English S	pecification, \$130	fee (no small entity di	scount)					
SUBMITTED BY Signature Registration No. (Attorney/Agent) 45,872 Telephone (713) 651-5407	SUBMITTED BY Signature Registration No. (Attorney/Agent) 45,872 Telephone (713) 651-540	Other (e.g., lat	e filing surcharge):	1252 Extension fo	r response wi	thin secon	d month	450.00		
Registration No. (Attorney/Agent) 45,872 Telephone (713) 651-5407	Registration No. (Attorney/Agent) 45,872 Telephone (713) 651-540		10 1							
		/ /	111/2	/N .	Registration No (Attorney/Agent	o. 45,8	72 Telephone	(713) 651-5407		
	Maine (Finite 1790) Michigan VV. (1000)		Molison W Accets				Date	February 22, 2005		

Γ		Fee Transmittal			
١	I haraby cartify that this corresponden	ice is being deposited with the U.S. Postal Service as Express Mail, Airbill No. ER540910555US,			
ı	in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.				
١	in all envelope addressed to: Commi	1/-1/			
ı	Dated: February 22, 2005	Signature: <u> </u>			